PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

1501220AP

		CLAIMS AS			SMALL ENTITY			OTHER				
TOTAL CLAIMS			(Column 1)		(Column 2)		 -	TYPE		OR	SMALL	
			$\alpha \alpha$		- · - · - · - · - · · · · · · · · · · ·			RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			minus 20=		• 2			X\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			minus 3 =					X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in column 2		L	TOTAL		OR	TOTAL	786
CLAIMS AS AMENDED - PART II											OTHER	THAN
<u> 101</u>	4/01	(Column 1)			(Column 2) (Column 3)			SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 23	Minus	** 2	3	= Z		X\$ 9=		OR	X\$18=	
	Independent	* 3	Minus			=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
								TOTAL DDIT. FEE			TOTAL ADDIT. FEE	
		^	DDI1. PEE			NDUII. FEE						
_		(Column 1) CLAIMS		(Colum	ST	(Column 3)	Ιг		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	##				X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF ML	Minus	***	O: A!!A	<u> -</u>		X42=		OR	X84=	
	FINOT PRESE	NIATION OF MC	JLIIPLE DEP	ENDENI	CLAIM		۱ <i>۲</i>	+140=		OR	+280=	
							L	TOTAL		ı	TOTAL	
								DDIT. FEE		OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	 -	X42=			X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	707-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
**	f the "Highest Nu	mber Previously Pa	id For IN THIS	S SPACE is	less than	n 20. enter "20."	. AD	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT, FEE	
	ii uie i riignest Nui Che "Highest Num	mber Previously Pa ber Previously Paid	d For (Total or	SPACE is Independe	ness than	n 3, enter "3." highest numbe			ropriate box			